

OCT 10 2007

PATENT
Attorney Reference Number 4239-67016-02Listing of Claims

1. (previously presented) A method of inhibiting recurrence of a tumor in a subject, comprising:

administering a therapeutically effective amount of a monoclonal antibody obtained from hybridoma 1D11.16 (ATCC Accession No. HB 9849) to the subject in order to block an immunosuppressive effect of transforming growth factor (TGF)- β in the subject, wherein the subject is at risk for recurrence of the tumor, and wherein the monoclonal antibody is specific for TGF- β and neutralizes an activity of TGF- β , thereby inhibiting recurrence of the tumor in the subject.

2. - 5. (canceled)

6. (previously presented) The method of claim 1, wherein the monoclonal antibody inhibits TGF- β from binding a TGF- β receptor.

7. (original) The method of claim 1, wherein the subject is a human.

8. (original) The method of claim 1, wherein the tumor is benign or malignant.

9. (original) The method of claim 1, wherein the tumor comprises a carcinoma, a sarcoma, a leukemia, a lymphoma, or a tumor of the nervous system.

10. (currently amended) The method of claim 1, wherein the tumor comprises a breast tumor, a liver tumor, a pancreatic tumor, a gastrointestinal tumor, a colon tumor, a uterine tumor, an ovarian tumor, a cervical tumor, a testicular tumor, a brain tumor, a skin tumor, a melanoma, a retinal tumor, a lung tumor, a kidney tumor, a bone tumor, a prostate tumor, a nasopharyngeal tumor, a thyroid tumor, a leukemia, or a lymphoma.

11. (currently amended) The method of claim 1, wherein the agent-monoclonal antibody is administered intravenously, subcutaneously, intradermally, or intramuscularly.
12. (canceled)
13. (previously presented) The method of claim 1, wherein blocking the immunosuppressive effect of the TGF- β results in increased immunosurveillance by lymphocytes of the subject.
14. (original) The method of claim 13, wherein the lymphocytes comprise T cells or B cells.
15. (original) The method of claim 13, wherein the lymphocytes include T cells, and the T cells comprise a cytotoxic T lymphocyte (CTL), a CD8⁺ CTL, a CD4⁺ cell, a CD4⁺ CD1d-restricted T cell, an NKT cell, or a combination thereof.
16. (original) The method of claim 13, wherein increased immunosurveillance is measured by an increased biological activity of the lymphocyte.
17. (original) The method of claim 16, wherein the increased activity of the lymphocyte is measured by a CTL assay.
18. (original) The method of claim 17, wherein the CTL assay comprises a chromium release assay.
19. – 20. (canceled)
21. (previously presented) The method of claim 1, wherein the monoclonal antibody inhibits TGF- β receptor signaling.
22. – 25. (canceled)

26. (previously presented) A method of enhancing an activity of an immune cell to inhibit recurrence of a tumor, comprising:

contacting a TGF- β receptor-expressing immune cell with an anti-TGF- β monoclonal antibody that is obtained from hybridoma 1D11.16 having ATCC Accession No. HB 9849, wherein the monoclonal antibody blocks a TGF- β signaling pathway and wherein blocking the TGF- β signaling pathway results in increased tumor immunosurveillance by the TGF- β receptor-expressing immune cell, thereby enhancing the activity of the immune cell to inhibit recurrence of the tumor.

27. (original) The method of claim 26, wherein the TGF- β receptor-expressing immune cell is a T cell or a B cell.

28. (original) The method of claim 26, wherein the TGF- β receptor-expressing immune cell includes T cells and the T cells comprise a CTL, a CD8⁺ CTL, a CD4⁺ cell, a CD4⁺ CD1d-restricted T cell, or an NKT cell.

29. – 31. (canceled)

32. (previously presented) A method of enhancing an immune response in a subject to inhibit recurrence of a tumor, comprising:

administering to the subject a therapeutically effective amount of an anti-TGF- β monoclonal antibody that is obtained from hybridoma 1D11.16 having ATCC Accession No. HB 9849, wherein the monoclonal antibody blocks a TGF- β signaling pathway and wherein blocking the TGF- β signaling pathway results in increased tumor immunosurveillance in the subject, thereby enhancing the immune response in the subject to inhibit recurrence of a tumor.

33. (original) The method of claim 32, wherein the immune response is a T cell response.

34. (original) The method of claim 33, wherein the T cell response comprises a CTL response, a CD8⁺ CTL response, a CD4⁺ T cell response, a CD4⁺ CD1d-restricted T cell response or an NKT cell response.

35. – 37. (canceled)

38. (original) The method of claim 32, wherein the subject is a human.

39. (currently amended) A method for screening for an agent that inhibits tumor recurrence, comprising:

contacting a TGF- β receptor-expressing immune cell with TGF- β ;
contacting the TGF- β receptor-expressing immune cell with an agent; and
assaying for a decrease in activity of TGF- β signaling in the TGF- β receptor-expressing immune cell, as compared to a TGF- β receptor-expressing control immune cell of the same type, wherein the control immune cell is not contacted with the agent, and wherein the decrease in activity of TGF- β signaling in the TGF- β receptor-expressing immune cell is indicative of an agent that inhibits tumor recurrence in a subject, thereby screening for an agent that inhibits tumor recurrence.

40. (original) The method of claim 39, further comprising assaying for an increase in activity of the TGF- β receptor-expressing immune cell.

41. (original) The method of claim 39, wherein the TGF- β receptor-expressing immune cell is a CTL.

42. (original) The method of claim 41, wherein the increase in activity of the CTL is measured by a CTL assay.

AC/TMH:gdh 10/09/07 4239-67016-02 729173 E-289-2002/0-US-03

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43. (original) The method of claim 39, wherein the decrease in activity of TGF- β signaling comprises decreased phosphorylation of a Smad protein, decreased nuclear translocation of a Smad protein, or decreased DNA binding of a Smad complex.
44. (original) The method of claim 40, wherein the increase in activity of the TGF- β receptor-expressing immune cell comprises increased immunosurveillance.
45. (original) The method of claim 44, wherein increased immunosurveillance comprises increased CTL activity.